

03/29/01  
11052 U.S. PTO

04-02-01

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PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	
	First Inventor or Application Identifier	HENRY TIEN LO
	Title	CARD GAME
	Express Mail Label No.	ET 229635592 US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 11] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]	<b>ACCOMPANYING APPLICATION PARTS</b> 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input checked="" type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input checked="" type="checkbox"/> Other: CHECK FEE TRANSMITTAL & COVER SHEET
4. Oath or Declaration [Total Pages 1] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none"><li>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li></ul></li></ul>	
<b>* NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</b>	

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No. _____
Prior application information: Examiner _____		Group / Art Unit: _____	

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	or <input checked="" type="checkbox"/> Correspondence address below
Name	ELMAN & ASSOCIATES GERRY J. ELMAN, ATTORNEY P.O. BOX 1969	
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Country	USA	Telephone (610) 892-9580 Fax (610) 892-9577

Name (Print/Type)	HENRY TIEN LO	Registration No. (Attorney/Agent)	N/A
Signature	<i>Henry Tien Lo</i>	Date	3-29-2001

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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)**355.00**

## Complete if Known

Application Number  
Filing Date **MARCH 29, 2001**  
First Named Inventor **HENRY TIEN LO**  
Examiner Name  
Group / Art Unit  
Attorney Docket No.

## METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

☐ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2. ☒ Payment Enclosed:  
☒ Check ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
		101 690	201 <b>345</b>	Utility filing fee	<b>355</b>
		106 310	206 155	Design filing fee	
		107 480	207 240	Plant filing fee	
		108 690	208 345	Reissue filing fee	
		114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$)**355.00**

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
17	-20**	0	0
1	-3**	0	0
Multiple Dependent		0	0

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
		103 18	203 9	Claims in excess of 20	
		102 78	202 39	Independent claims in excess of 3	
		104 260	204 130	Multiple dependent claim, if not paid	
		109 78	209 39	** Reissue independent claims over original patent	
		110 18	210 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)**0**

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
		105 130	205 65	Surcharge - late filing fee or oath	
		127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
		139 130	139 130	Non-English specification	
		147 2,520	147 2,520	For filing a request for reexamination	
		112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
		113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
		115 110	215 55	Extension for reply within first month	
		116 380	216 190	Extension for reply within second month	
		117 870	217 435	Extension for reply within third month	
		118 1,360	218 680	Extension for reply within fourth month	
		128 1,850	228 925	Extension for reply within fifth month	
		119 300	219 150	Notice of Appeal	
		120 300	220 150	Filing a brief in support of an appeal	
		121 260	221 130	Request for oral hearing	
		138 1,510	138 1,510	Petition to institute a public use proceeding	
		140 110	240 55	Petition to revive - unavoidable	
		141 1,210	241 605	Petition to revive - unintentional	
		142 1,210	242 605	Utility issue fee (or reissue)	
		143 430	243 215	Design issue fee	
		144 580	244 290	Plant issue fee	
		122 130	122 130	Petitions to the Commissioner	
		123 50	123 50	Petitions related to provisional applications	
		126 240	126 240	Submission of Information Disclosure Stmt	
		581 40	581 40	Recording each patent assignment per property (times number of properties)	
		146 690	246 345	Filing a submission after final rejection (37 CFR § 1.129(a))	
		149 690	249 345	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**0**

## SUBMITTED BY

Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone	Date
<b>HENRY TIEN LO</b>	<b>N/A</b>	<b>(702) 432-5555</b>	<b>3-29-2001</b>
Signature	<i>Henry Tien Lo</i>		

## WARNING:

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